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observed them, which from his own expressions does no honor to the nurses with whom he has associated, but we also ask for a more fair conclusion to ourselves as a body, and to the public.

"Should the nurse's life outside her actual work be spoken of?" *Yes*, truthfully and broad-mindedly spoken of, but not in this insinuating manner. If there are unpleasant things in a nurse's life outside her work, they are found only by her looking for them, as can be said of individuals of any other class, and, comparatively, we as nurses find less than the average girl in any other professional or business life. Why mountinize these temptations, if there be any?

"Many attractive girls find their way into nurses' training schools." They do *not* "find their way" but must achieve a standard of education and morals as does a girl entering any other school. Do not our hospital heads exert as strict discipline and restraint as is exercised in a good home or school life of the present day? "The people they are thrown with may not all be desirable." In what life do we find all desirable people? And I warrant the nurse is as discreet a chooser as the average girl.

The first part of Dr. Mills' discourse I should think in place if given to a senior class of a training school, but the last paragraph is as much uncalled for and misleading in a nurses' journal as anywhere else.

We nurses in the Far East, as a body, and I feel we have the co-operation of the nurses of our home states as well, should, before accepting Dr. Mills' article as the opinion of one of our medical profession, inquire where he stands in his profession and if his mental capacity is without question. N. O. T.

Philippine Islands.

II.

DEAR EDITOR: Is there a nurse in active work, in the world, who has not met, at some time or other, impossible physicians, or is there a physician who has not met equally impossible nurses? Is it not true that one finds in every profession and in every walk of life ill-bred, even immoral men and women, but must an entire profession suffer eternally for the sins of its less worthy representatives?

Can't we set as our ideals the best men and women we have known in both the medical and nursing professions, and forget the other kind? Surely we need not write about them. They are the last to be able to fit the shoes to themselves.

The world has still many "doctors of the old school," so beautifully described by Ian McLaren, and the nurses at Dayton demonstrated that the spirit of service and sacrifice has not quite died within us. Let us be thankful for that and resolve to work all the harder to raise our own standards.

Illinois.

E. L. F.

[The letter department is always open to nurses for the discussion of any question, but we think the suggestions of the above writer should be considered seriously. Such questions, as they arise, should be looked at broadly and not taken in a personal way.—Ed.]

THE NURSE AS A PATIENT

DEAR EDITOR: A great deal is written nowadays about the increasing demands of the nursing profession, and during my small experience in training I know of no more necessary qualification to obtain than that of self-control,

such self-control as is exemplified by a patient struggling, in spite of a tortured brain and a physical ailment, to maintain a normal state of mind.

Many a nurse is obliged during training to succumb to the weaknesses of the flesh and to become the patient. We little value this important period of our training, and those nurses who congratulate themselves that they were never ill a day have lost a splendid lesson in discipline. When the nurse is laid low in the hospital ward, whether it be a simple sore throat or "just a plain appendix," time hangs heavy on her hands, she begins to think of the possibilities of her malady, perhaps she had taken her own temperature before reporting, she remembers feeling chilly early that morning, awoke that night with a sharp shooting pain in her abdomen, and now she recalls that these were just the symptoms of a serious disease she had taken up at her last clinic; she knows she has not stored-up energy to fight such an illness, consequently when the doctor comes in to call, the nurse patient not only has an abnormal temperature and pulse but has lost all her pluck and courage. The result is that the doctor gets a very exaggerated description of her condition. This is the time when the self-control that she has practised so diligently on her own patients is put to the test, and the nurse, who, knowing the meaning of all her symptoms, can lie peacefully in bed and accept her fate as part of the course, has truly learned the lesson of her life work. The nobility of her work is displayed by self-control more than any other virtue, and the nurse who has passed this test against the odds of illness is far better able to minister to others afflicted than she was before she had felt the pangs of physical pain.

In the daily routine of our work we learn much of the idiosyncrasies of our patients, especially the women, and we never stop to consider that we ourselves develop these same peculiarities in our own illnesses, only we generally add a highly-strung nervous condition, making us far harder people to care for than the ordinary hospital patient. Realizing this, the nurse can fortify herself against the petty annoyances of the sick room by totally forgetting self and showing the same consideration to her attending nurse as she herself would expect from a patient.

We do not appreciate how much there is to observe as a patient, and having been a surgical case on the ward for several weeks, we experience "just how it feels." During the first stage of observation, our self-control fights bravely against the suspense and uncertainty of the surgeon's decision. The immediate post-operative period is far more uncomfortable than we imagine from any description our patients ever gave us; here we need grit and it is at this time the patient seeks the moral courage and sympathy that only the feminine hand can give. The nurse that can comfort a patient at this time is "truly an Angel of Mercy." The time of convalescence is perhaps the most trying to the sick nurse. Ever thoughtful of her work, she seems to lay down the reins of self-help and worries, the days are long and tedious, and every effort has to be put in play to practise unselfishness, to control the desire to be up and doing, and to be docile to the directions of her sister nurses. We should always remember that in mastering our self-control we really radiate the joys of living to all about us.

It is not the contention of this paper to prove that a siege of illness is necessary in the curriculum of the training school, but to encourage the nurse whose ambition may be weakened by such indisposition.

J. A. M.

Massachusetts.